PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifica	ed below or directed oth	ng the Patent, advance nerwise in Block 1, by	orders and notification of a (a) specifying a new corres	maintenance fees w spondence address;	and/or	nailed to the current (b) indicating a separ	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPOND	Fee pap	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
THE NATH LA 112 South West Alexandria, VA	Stat add	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
							(Depositor's name)
			<u> </u>				(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.		RNEY DOCKET NO.	CONFIRMATION NO.
10/791,279 03/03/2004 Theodor Stern 26041 8931 TITLE OF INVENTION: PH REDUCING FORMULATION							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0		\$1055	01/14/2011
EXAM	INER	ART UNIT	CLASS-SUBCLASS	1			
VAKILI, ZOHREH		1614	604-385180	J			
1. Change of correspondence address or indication of "Fee Address" (3' CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED CORRESPONDED TO THE PLEASE NOTE: Unless an assignee is identified below, no assignee is identified below, no assignee.			e data will appear on the patent. If an assignee is identified below, the document has been filed for				
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Caesarea, ISRAEL							
Please check the appropr	iate assignee category or	categories (will not be	printed on the patent): \Box	•	rporatio	on or other private gro	up entity Government
4a. The following fee(s) (1) Issue Fee Publication Fee (N Advance Order - 4	To small entity discount p	 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 110117 (enclose an extra copy of this form). 					
11	s SMALL ENTITY statt	ıs. See 37 CFR 1.27.	☐ b. Applicant is no lon				
interest as shown by the i	records of the United Sta	tes Patent and Tradema	rk Office.	ые аррисані, а те <u>д</u> і	sicreu a	acorney or agent, or the	assignee of other party III
	/Susanne M.	Date January 14, 2011					
Typed or printed name Susanne M. Hopkins			Registration No. 33,247				
an application. Confiden submitting the completed	tiality is governed by 35 I application form to the	U.S.C. 122 and 37 CF. USPTO. Time will va	tion is required to obtain or r R 1.14. This collection is est ry depending upon the indiv the Chief Information Office	timated to take 12 n vidual case. Any co	ninutes mments	to complete, including on the amount of tin	g gathering, preparing, and ne you require to complete

uns form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.